

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814
(916) 322-6320



May 19, 1982

ALL-COUNTY LETTER NO. 82-45

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: COUNTY PLAN AMENDMENT GUIDELINES

REFERENCE: WELFARE AND INSTITUTIONS CODE, SECTION 12302

The following guidelines are for use by any county whose Fiscal Year 1981/82 IHSS expenditures may exceed its allocation. Counties should be closely monitoring expenditures for the remainder of the fiscal year and document necessary corrective action through an amendment to the County Plan. This Department is also monitoring expenditures and may require that such documentation be prepared.

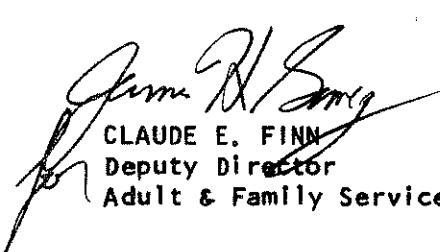
In its monitoring efforts, the county should analyze its current fiscal situation using actual costs to date. The county should then project expenditures for the remainder of the fiscal year. The estimate should reflect any proposed program changes that will affect Fiscal Year 1981/82 expenditures such as mode shifts or changes in contract costs and wage rates.

If expenditures are projected to exceed the allocation, the county is required to immediately notify Adult Services Systems Bureau (ASSB), formerly IHSS Bureau. In addition, the county must submit the attached schedule as an amendment to its 1981/82 County Plan as soon as possible. This schedule, with accompanying narrative, will become a revision to Part III, Monthly Expenditure Forecast, of the Plan. ASSB staff have developed updated expenditure records and Fiscal Year 1981/82 forecasts for every county and are available to discuss the results in detail.

The county is not required to submit a revised Part I. Also, the county should not submit Parts II or IV. No planning for implementation of "a-e" reductions should occur until other alternatives have been analyzed jointly with ASSB.

Plans amendments and any related questions should be addressed to:

Adult Services Systems Bureau
744 P Street, M.S. 5-126
Sacramento, California 95814
(916) 322-6320 or ATSS 8-492-6320


CLAUDE E. FINN
Deputy Director
Adult & Family Services

Attachment

cc: CWDA

PART III(a) AMENDMENT TO COUNTY PLAN

County: _____

Allocation: \$ _____

Month	(1) Cases Paid	Cost				
		(2) Individual Provider	(3) Contract	(4) Welfare Staff	(5) Total	(6) Cumulative Total
July						
August						
September						
Sub. 1st qtr.						
October						
November						
December						
Sub. 2nd qtr.						
January						
February						
March						
Sub. 3rd qtr.						
April						
May						
June						
Sub. 4th qtr.						
TOTAL						

ACTUAL FIGURES SHOULD BE USED THROUGH APRIL. COST AMOUNTS SHOULD RECONCILE TO QUARTERLY CLAIMS AND INDIVIDUAL PROVIDER MANAGEMENT STATISTICAL SUMMARY. FOOTNOTE AND EXPLAIN EXCEPTIONS. EXPLAIN FULLY IN AN ATTACHED NARRATIVE, THE ESTIMATING METHODOLOGY FOR MAY AND JUNE. DUE TO THE IMPLEMENTATION OF SB 633 (CHAPTER 69, STATUTES OF 1981), IT IS EXTREMELY IMPORTANT THAT THE MOST RECENT DATA BE USED FOR THE ESTIMATE. THE ESTIMATE SHOULD REFLECT ANY ANTICIPATED PROGRAM CHANGES (e.g., MODE SHIFT, WAGE OR CONTRACT RATE).

Contact Person:	Title:	Telephone number:
Director's signature:		Date: